

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98119

**Entity Name:** AMERICHEM PHARMACEUTICAL CORP.

**Current Principal Place of Business:**

2862 N.W. 79TH AVE  
DORAL, FL 33122

**Current Mailing Address:**

2862 NW 79TH AVE  
DORAL, FL 33122 US

**FEI Number:** 59-2227280

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LLORET, ILIANA  
1820 S.W. 99TH CT.  
MIAMI, FL 33165 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PST  
Name LLORET, ILIANA  
Address 1820 S.W. 99TH CT.  
City-State-Zip: MIAMI FL 33165

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ILIANA LLORET

**PRESIDENT**

**05/13/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date